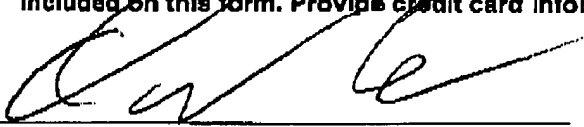


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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)		Docket No.	
Applicant(s): JOHN P. RUCKART		01093 (BLL-0271)	
Application No. 10/086,338	Filing Date March 1, 2002	Examiner Lisa Hashem	Group Art Unit 2645
Invention: TELEPHONE HOLD FEATURE			
I hereby certify that this <u>Amend. Trans. Ltr. and Response to Office Action</u>			
(Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>)			
on <u>April 4, 2006</u>			
(Date)			
Sheila Smedick			
(Typed or Printed Name of Person Signing Certificate)			
_____ <i>(Signature)</i>			
Note: Each paper must have its own certificate of mailing.			

P18/REV02

APR 04 2006

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 01093 (BLL-0271)									
Applicant(s): JOHN P. RUCKART														
Application No. 10/086,338	Filing Date March 1, 2002	Examiner Lisa Hashem	Customer No. 36192	Group Art Unit 2645	Confirmation No. 4121									
Invention: TELEPHONE HOLD FEATURE														
COMMISSIONER FOR PATENTS:														
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.														
CLAIMS AS AMENDED														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	17 -	20 -	0	x \$50.00	\$0.00									
INDEP. CLAIMS	3 -	4 -	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
 Signature			Dated: April 4, 2006											
David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Facsimile (860) 286-0115 Customer No. 36192			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</td> </tr> <tr> <td colspan="2" style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____		(Date)		Signature of Person Mailing Correspondence		Typed or Printed Name of Person Mailing Correspondence	
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cc:														

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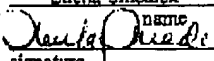
APR 04 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: JOHN P. RUCKART)	
)	
SERIAL NO.: 10/086,338)	ART UNIT:
)	2645
FILED: March 1, 2002)	
)	EXAMINER:
FOR: TELEPHONE HOLD FEATURE)	Lisa Hashem

I hereby certify that this correspondence is
being transmitted to the United States Patent
& Trademark Office via facsimile to facsimile
Number (571) 273-8300 on April 4, 2006

Sheila Smedick

	<small>name</small>	<u>4-4-06</u>
<small>signature</small>		<small>date</small>

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Applicant respectfully requests consideration of the following amendment and remarks contained herein in response to the Office Action mailed January 4, 2006. Applicant respectfully submits that the amendment and remarks contained herein place the instant application in condition for allowance.